

51-540-00003



UNIVERSITY of VIRGINIA
OFFICE OF THE VICE PRESIDENT FOR RESEARCH
ENVIRONMENTAL HEALTH & SAFETY

September 14, 2009

Judith Katz (3AP00)
Director, Air Protection Division
U.S. Environmental Protection Agency
Region III
1650 Arch Street
Philadelphia, PA 19103-2029

RECEIVED
SEP 29 2009
Air Protection Division
(3AP10)

RE: Registration 40200, Net ID No. 51-540-0003, Initial Notification Form, 40 CFR 63, Subpart ZZZZ, Stationary Reciprocating Internal Combustion Engines, Hospital Multistory Building New 600 kW Emergency Generator, University of Virginia, Charlottesville, VA

Dear Director Katz:

As required under 40 CFR Part 63, subpart ZZZZ, attached is the completed Initial Notification Form covering a stationary reciprocating internal combustion engine recently installed at the Multistory Building of the University of Virginia Hospital in Charlottesville, Virginia. This unit is a compression ignition emergency generator and as such under Subpart ZZZZ requires only initial notification.

If you or your staff have any questions, please contact me at (434) 982-4901 or by email at sitler@virginia.edu.

Sincerely,

Jeffrey A. Sitler, CPG
Environmental Compliance Manager

Attachment – Initial Notification Form

CC: Amy Owens, VA DEQ
Kristin Carter

Initial Notification Form
[40 CFR 63.9(b)(2)]¹

Applicable Rule: 40 CFR part 63, subpart ZZZZ – National Emission Standards for Hazardous Air Pollutants for Stationary Reciprocating Internal Combustion Engines (RICE MACT)

Please read the rule for details on requirements and deadlines. Notification requirements are found in §63.6645 of subpart ZZZZ and §63.9 of the General Provisions as noted.

Please note that you are not required to use this form and may submit the required information in a letter. However, all required information must be submitted by the following initial notification deadlines:

- **December 13, 2004** for sources whose startup occurs before August 16, 2004; **OR**
- **Not later than 120 days after startup**, if startup occurs on or after August 16, 2004.

Please print or type the following information for each source subject to the RICE MACT.

1. Name and Address of Facility Owner [40 CFR §63.9(b)(2)(i) and (ii)]

Name of Facility: University of Virginia Hospital Multistory Building

Name of Owner/Operator: University of Virginia

Mailing Address: P.O. Box 400322, Office of Environmental Health and Safety

City: Charlottesville County: Albemarle State: VA Zip Code: 22904-4322

Physical Location (if different from mailing address)

Street Address: 1335 Lee Street

City: Charlottesville County: Albemarle State: VA Zip Code: 22904

Contact Person: Jeffrey A. Sitler, Envir. Compliance Mgr Phone Number: 434-982-4901

Email: sitler@virginia.edu

2. Is the facility a Major Source [40 CFR §63.9(b)(2)(v)]? ☐ Yes ☒ No*

*(The facility is considered an area source and does not need to submit this form)

2a. Do you intend to accept enforceable permit limits to reduce emissions of hazardous air pollutants (HAP) to less than major source levels prior to the MACT compliance date(s) for engines at this facility? ☐ Yes* ☒ No

*If yes, please attach a description of the action(s) planned to achieve non-major status. NOTE: The description of action(s) planned to achieve non-major status is provided for information only and is not binding. If you take federally enforceable permit limits, prior to the subpart ZZZZ compliance date, to reduce total HAP emissions from your facility such that you are not longer a major source (as defined in 40 CFR §63.2), engines located at your facility will not be subject to the subpart (refer to the instructions).

4. For the stationary RICE listed in question 3, provide a list of the HAP emitted [40 CFR §63.9(b)(2)(iv)].

- | | |
|------------------------|-------------------|
| 1. <u>Formaldehyde</u> | 7. <u>toluene</u> |
| 2. <u>acrolein</u> | 8. <u>xylene</u> |
| 3. <u>methanol</u> | 9. _____ |
| 4. <u>acetaldehyde</u> | 10. _____ |
| 5. <u>benzene</u> | 11. _____ |
| 6. <u>naphthalene</u> | 12. _____ |

5. Signature

I certify that the information contained in this form to be accurate and true to the best of my knowledge.

Authorized Signature

Leonard W. Sandridge, Jr.

Typed or Printed Name of Signatory Leonard W. Sandridge, Jr

Title of Signatory Executive Vice President and COO

Date

09/18/09

Please mail this completed form to both your State Air Pollution Control Office and your EPA Regional Office